

Docket No.: TEI-0135

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Kazuo Imose

Group Art Unit: 4153

Application No.: 10/551,668

Confirmation No.: 5514

Filing Date: September 30, 2005

For: EXAMINATION APPARATUS FOR
SLEEP RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM

REQUEST FOR CORRECTED FILING RECEIPT

VIA FACSIMILE: 571-273-3201 (7 pages, including cover)
Attn: PCT Section, Customer Service

Commissioner for Patents
P.O. Box 1450
Washington, D.C. 22313-1450

Sir:

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following, which is incorrectly entered. We are also enclosing a copy of the executed declaration showing the correct data.

Error:

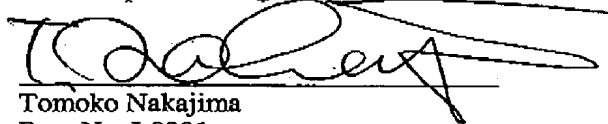
1. Title

Correct data to title:

1. EXAMINATION APPARATUS FOR SLEEP
RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM

3. The correction is due to an error by the USPTO. If any fee is due, please charge Deposit Account No. 18-0013.

Dated: February 6, 2008


Tomoko Nakajima
Reg. No. L0231

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/551,668	09/30/2005	3736	1860	TEI-0135	4	13	6

CONFIRMATION NO. 5514

23353
RADER FISHMAN & GRAUER PLLC
LION BUILDING
1233 20TH STREET N.W., SUITE 501
WASHINGTON, DC 20036

FILING RECEIPT

OC000000019225998

Date Mailed: 06/15/2006

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Applicant(s)

Kazuo Imose, Tokyo, JAPAN;

Power of Attorney: The patent practitioners associated with Customer Number 23353.

Domestic Priority data as claimed by applicant

This application is a 371 of PCT/JP04/04712 03/31/2004

Foreign Applications

JAPAN 2003-098992 04/02/2003

If Required, Foreign Filing License Granted: 06/10/2006

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/551,668**

Projected Publication Date: 09/21/2006

Non-Publication Request: No

Early Publication Request: No

DATE

Title

DOCKETED SA

Preliminary Class
600~~Sleep respiratory disorder examination device and treatment system~~*"Examination apparatus for sleep
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therapeutic system"***PROTECTING YOUR INVENTION OUTSIDE THE UNITED STATES**

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PTO/SB/106 (5-00)

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As a below named inventor, I hereby declare that:

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My residence, post office address and citizenship are as stated next to my name.

下記の名称の発明について、特許請求範囲に記載され、且つ特許が求められている発明主題に関して、私は、最初、最先且つ唯一の発明者である（唯一の氏名が記載されている場合）か、或いは最初、最先且つ共同発明者である（複数の氏名が記載されている場合）と信じている。

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

"EXAMINATION APPARATUS FOR SLEEP
RESPIRATORY DISTURBANCE AND
THERAPEUTIC SYSTEM"

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as United States Application Number or
PCT International Application Number
PCT/JP2004/004712 and was amended on
_____ (if applicable).

私は、上記の補正書によって補正された、特許請求範囲を含む上記明細書を検討し、且つ内容を理解していることをここに表明する。

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Prior Foreign Application(s)

外国での先行出願

Priority Not Claimed

優先権主張なし

2003-098992

JAPAN

02/April/2003

(Number)
(番号)(Country)
(国名)(Day/Month/Year Filed)
(出願日/月/年)(Number)
(番号)(Country)
(国名)(Day/Month/Year Filed)
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(Application No.)
(出願番号)(Filing Date)
(出願日)(Application No.)
(出願番号)(Filing Date)
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(Application No.)
(出願番号)(Filing Date)
(出願日)(Status: Patented, Pending, Abandoned)
(現況: 特許許可、係属中、放棄)(Application No.)
(出願番号)(Filing Date)
(出願日)(Status: Patented, Pending, Abandoned)
(現況: 特許許可、係属中、放棄)

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (list name and registration number).

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Direct Telephone Calls to: (name and telephone number)

唯一または第一発明者氏名		Full name of sole or first inventor	
Kazuo IMOSE			
発明者の署名	日付	Inventor's signature	Date
		<i>Kazuo Imose</i>	September 22, 2005
住所		Residence	
Tokyo, Japan			
国籍		Citizenship	
Japanese			
郵便の宛先		Post Office Address	
c/o Teijin Pharma Limited, 1-1, Uchisaiwaicho 2-chome, Chiyoda-ku, TOKYO 100-0011 JAPAN			
第二共同発明者がいる場合、その氏名		Full name of second joint inventor, if any	
第二共同発明者の署名	日付	Second inventor's signature	Date
住所		Residence	
国籍		Citizenship	
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(第三以下の共同発明者についても同様に記載し、署名をすること)
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